

**Political Organization
Notice of Section 527 Status**

OMB No. 1545-1693

Part I General Information

1 Name of organization

MoveOnForAmerica.Org

Employer identification number

10 - 6503133

2 Mailing address (P.O. box or number, street, and room or suite number)

2200 Wilson Boulevard Suite 49

City or town, state, and ZIP code

Alexandria, VA 22201

3 Check applicable box:

☒ Initial notice

☐ Amended notice

☐ Final notice

4a Date established

09/03/2004

4b Date of material change

5 E-mail address of organization

moveonforamerica@.org

6a Name of custodian of records

Stephen Q Marks

6b Custodian's address

2200 Wilson Boulevard Suite 49
Alexandria, VA 22201

7a Name of contact person

Stephen Q Marks

7b Contact person's address

2200 Wilson Boulevard Suite 49
Alexandria, VA 22201

8 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

2200 Wilson Boulevard Suite 49

City or town, state, and ZIP code

Alexandria, VA 22201

9a Election authority

NONE

9b Election authority identification number

Part II Notification of Claim of Exemption From Filing Certain Forms (see instructions)

10a Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expenditures, as a qualified state or local political organization? Yes ☒ No ☐

10b If 'Yes,' list the state where the organization files reports: VA

11 Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes ☒ No ☐

Part III Purpose

12 Describe the purpose of the organization

Issue Advocacy

Part IV List of All Related Entities (see instructions)

13 Check if the organization has no related entities.....✓

14a	Name of related entity	14b	Relationship	14c	Address
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Part V List of All Officers, Directors, and Highly Compensated Employees (see instructions)

15a	Name	15b	Title	15c	Address
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Stephen Q Marks	Preesident	2200 Wilson Boulevard Suite 49 Alexandria, VA 22201
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Under penalties of perjury, I declare that the organization named in Part I is to be treated as a tax-exempt organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that I am the official authorized to sign this report, and I am signing by entering my name below.

Steven Q Marks

09/03/2004

**Sign
Here**

Name of authorized official

Date